

**PART B - FEE(S) TRANSMITTAL**

Complete and send this form, together with applicable fee(s), to: **Mail**

**Mail Stop ISSUE FEE**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, Virginia 22313-1450**

**or Fax** (703) 746-4000

**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590 03/29/2005

Gregory A. Nelson  
Akerman Senterfitt  
P.O. Box 3188  
222 Lakeview Avenue, Fourth Floor  
West Palm Beach, FL 33402-3188  
06/01/2005 MBEYEN2 00000029 09865393

01 FC:1501 1400.00 0P  
02 FC:1504 300.00 0P

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/865,393      | 05/25/2001  | Leonard S. Hand      | 6169-203            | 4209             |

**TITLE OF INVENTION: SYSTEM AND METHOD FOR POST- ANALYZING, AND SEQUENTIALLY VISUALIZING PLURALITY OF PREDEFINED METRICS IN A STORED DYNAMIC DATA VALUES ASSOCIATED IDENTIFIERS WITHIN DETERMINED TIME RANGE**

| APPLN. TYPE    | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE   |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO           | \$1400    | \$300           | \$1700           | 06/29/2005 |

| EXAMINER                 | ART UNIT | CLASS-SUBCLASS |
|--------------------------|----------|----------------|
| CHANNAVAJJALA, SRIRAMA T | 2166     | 707-102000     |

|   |   |                           |
|---|---|---------------------------|
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | <u>Akerman Senterfitt</u> |
| <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.   |   | 2. _____                  |
| <input checked="" type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. |   | 3. _____                  |

**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for reexamination as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

International Business Machines Corporation, Armonk, NY

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

Issue Fee  
 Publication Fee (No small entity discount permitted)  
 Advance Order - # of Copies \_\_\_\_\_

A check in the amount of the fee(s) is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0951 (enclose an extra copy of this form).

**5. Change in Entity Status (from status indicated above)**

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature \_\_\_\_\_

Date May 23, 2005

Typed or printed name Gregory A. Nelson

Registration No. 30,577

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



Application No. : 09/865,393 Confirmation No. : 4209  
Applicant : Hand, *et al.*  
Filed : May 25, 2001  
TC/A.U. : 2166  
Examiner : CHANNAVAJJALA, SRIRAMA T  
Docket No. : 6169-203  
IBM Docket No. : BOC9-2000-0067

---

### TRANSMITTAL LETTER

---

MAIL STOP ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

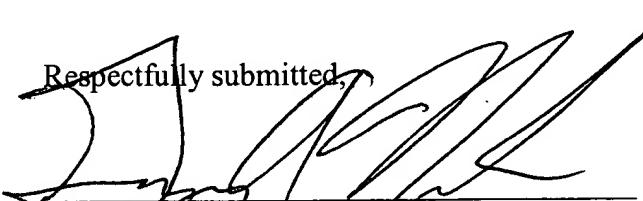
Sir:

Please find enclosed for filing:

1. Form PTOL-85B (Issue Fee, Advanced Order)
2. Fee Address Indication Form (PTO/SB/47)
3. Check in the amount of \$1,700.00
4. Please charge any deficiencies or credit any overpayment to Deposit Account No. 50-0951.

This Transmittal Letter as well as the Fee Transmittal Form PTOL-85B are submitted in duplicate.

Date: 5/23/05

Respectfully submitted,  
  
Gregory A. Nelson, Registration No. 30,577  
Brian K. Buchheit, Registration No. 52,667  
AKERMAN SENTERFITT  
Customer No. 40987  
Post Office Box 3188  
West Palm Beach, FL 33402-3188  
Telephone: (561) 653-5000